

CLAIMS ONLY							Application Number 101807073	Filing Date				
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	/						51					
2		/					52					
3		/					53					
4		/					54					
5		/					55					
6		/					56					
7		/					57					
8	/						58					
9		/					59					
10		/					60					
11		/					61					
12		/					62					
13		/					63					
14		/					64					
15	/						65					
16		/					66					
17		/					67					
18		/					68					
19		/					69					
20		/					70					
21		/					71					
22	/						72					
23		/					73					
24		/					74					
25		/					75					
26		/					76					
27		/					77					
28		/					78					
29	/						79					
30		/					80					
31		/					81					
32		/					82					
33		/					83					
34		/					84					
35		/					85					
36	/						86					
37		/					87					
38		/					88					
39		/					89					
40		/					90					
41		/					91					
42		/					92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	6						Total Indep					
Total Depend	36						Total Depend					
Total Claims	42						Total Claims					